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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number			
CLAIMS AS FILED - PART I (Column 1) (Column 2)						_	SMALL ENTITY		OR .	OTHER THAN SMALL ENTITY		
FOR N			ER FILED	NUMB	NUMBER EXTRA		RATE	FEE	].	RATE	FEE	
BASIC FEE (37 CFR 1.16(a))						1		s	OR		s	
TOTAL CLAIMS (37 CFR 1.16(c))			minus 20			1	x s=		1	x \$_ =		
INDEPENDENT CLAIMS		MS .							OR			
(37 CFR.X:16(b)) minus 3 = •						┨	× \$=		OR	X \$=	1	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))							+ \$=		. OR	+\$=		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		OR	TOTAL		
, CLAIMS AS AMENDED - PART II												
621/100									OR	OTHER	RTHAN	
1	NEIDE	(Column 1)	T	(Column 2) HIGHEST	(Column 3)	1	SMALL	NTITY	) 	SMALL	ENTITY	
¥ 		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
EN	Total	AMENDMENT	100	PAID FOR				FEE			FEE	
I ⊠	Total (37 CFR 1.16(c))	118	Minus	119			x \$=		OR	x \$=		
AMENDMENT	Independent (37 CFR 1.16(b))	7	Minus	7	=	i	x s=		OR	x s=		
₹	FIRST PRESENT	TATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))		+s =		OR	+\$ =		
	· · · · · · · · · · · · · · · · · · ·						TOTAL		OR	TOTAL		
						•	ADD'L FEE		OR	ADD'L FEE		
		(Column 1) CLAIMS	1	(Column 2) · HIGHEST		1		•		r		
IT B		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
Æ	Total	AMENDMENT	Minus	PAID FOR				FEE			FEE	
ğ	(37 CFR 1.16(c)) Independent		Minus	***	=		X \$=		OR	x \$=		
AMENDMENT	(37 CFR 1.16(b))	l	Millus		<u> </u>		x \$=		OR	x \$=		
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ \$=		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)							,					
	<del></del>	(Column 1) CLAIMS		HIGHEST	(Column 3)	ı		1				
		REMAINING AFTER		NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
<b> </b>	Total	AMENDMENT	Minus	PAID FOR				FEE			FEE	
	(37 CFR 1.16(c)) Independent			***	2		x \$=		OR	x \$=		
AMENDMENT	(37 CFR 1.16(b))		Minus		L		x \$=		OR	x <b>s</b> =		
ई	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=	.:	OR	+ \$=		
$\Gamma$									OR '	TOTAL ADD'L FEE	×.	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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